## Application for Employment – Town of North Haven



### TOWN OF NORTH HAVEN Finance Office 18 Church Street North Haven, CT 06473 (203) 239-5321

### **EQUAL EMPLOYMENT OPPORTUNITY**

THE TOWN OF NORTH HAVEN IS AN EQUAL OPPORTUNITY EMPLOYER. THIS MEANS THAT ALL APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, NATIONAL ORIGIN, RELIGION, AGE, SEX, MARITAL STATUS, PREGNANCY, SEXUAL ORIENTATION, THE PRESENCE OF NON-JOB-RELATED MEDICAL CONDITION OR DISABILITY, VETERAN STATUS OR ANY OTHER LEGALLY PROTECTED CLASS.

The Application must be completed fully and accurately, even if a resume is attached, and must bear an original signature. Any applicant who provides false Information will be subject to disqualification.

# Position Applying for:

	Date Ava	ilable		
Full Time:	Part Time:			
Name:First	MI	Last		
	State/Zipcode			
Telephone (home)	Work			
Cell:	Email:			
Referral Source				
Are you legally eligible for emplo		YES( ) NO( )		
Are you of legal age to work? YE If you are under 18, can you pro\	, ,	YES() NO()		
		cation process? YES ( ) NO ( )		
Have you ever been employed b	y the Town of North Haven?	YES( ) NO( )		

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is any member of your immediate family now employed by the Town of North Haven?			
YES ( ) NO ( ) If Yes, Name			
Are you currently employed? YES ( ) NO ( ) If yes, may we inquire of your present employer? YES ( ) NO ( )			
Employment Information:			
Are you physically and mentally able to perform the essential functions of the job applied for? YES ( ) NO( )			
If no, is there any accommodation that would allow you to perform this job? YES ( ) NO ( ) If yes, please explain?			
Have you ever been convicted of a felony or misdemeanor? YES ( ) NO ( )			
If Yes, please list felonies and misdemeanors and explain.			

NOTE: The applicant is not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes sections 46b-146, 54-760 or 54-142a. The applicant is not required to disclose the existence of criminal records that are subject to erasure pursuant to Connecticut General Statutes sections 46b-146, 54-760 and 54-142a which are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolled, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon. The applicant is not required to disclose the existence of criminal records that have been erased pursuant to Connecticut General Statutes sections 46b-146, 54-760 or 54-142a since the applicant shall be deemed to have never been arrested within the meaning of the general statutes with respect to these proceedings so erased and may so swear under oath.

### **Educational History:**

	Elementary	High School	College	Trade School	Other
School Name					
Years Completed					
Diploma/Degree Received?					
Subjects Studied					

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Describe specialized training, apprentice which you are applying (omit any activity)			
	<u> </u>		
Driver Information:			
Certain positions with the Town of North Hrequires driving, please answer the followi	laven require employees to c ng:	Irive. If you are applying fo	or a position which
Do you have a valid driver's license? Ye	es ( ) No ( )		
If Yes - license no	State	Expiration dat	e
Do you have a CDL? Yes ( ) No (	) If yes, Class A or B?	and Number	·
Has your license ever been revoked or s	suspended? Yes No	_	
Other Licenses or Skills:			
Typing skill (if applicable)	WPM		
Computer skill (if applicable) list all compu		ou are proficient in:	
List office aguipment you can energte (if a	anliachla)		
List office equipment you can operate (if a	pplicable)		
Heavy equipment which you can operate (	(if applicable)		
Employment History - DO NOT LEAVE I	<u>BLANK</u>		
List below your employment history. Start	with your most recent emplo	yer first. Attach an addition	nal sheet if necessary
Current/Most recent Employer:	From	n:To:	-
Address:	Phor	ne:	
Name & Title of Supervisor:	May	we contact?	
Your Title:	Sala	ıry \$	
Duties:			
Reason for Leaving:			

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Current/Most recent Employer:	From:1o:	
Address:	Phone:	
Name & Title of Supervisor:	May we contact?	
Your Title:	Salary \$	
Duties:		
Reason for Leaving:		
	From:To:	
Address:	Phone:	
Name & Title of Supervisor:	May we contact?	
Your Title:	Salary \$	
Duties:		
Reason for Leaving:		
Current/Most recent Employer:	From:To:	
Address:	Phone:	
Name & Title of Supervisor:	May we contact?	
Your Title:	Salary \$	
Duties:		
Reason for Leaving:		
Current/Most recent Employer:	From:To:	
Address:	Phone:	
Name & Title of Supervisor:	May we contact?	
Your Title:	Salary \$	
Duties:		
Reason for Leaving:		

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Current/Most recent Employer:		From:	To:			
Address:		Phone	e:			
Name & Title of Supervisor:		May v	ve contact?			
Your Title:		Salar	y \$			
Duties:						
Reason for Leaving:						
Current/Most recent Employer:		From:	To:			
Address:	<del> </del>	Phone	Phone:			
Name & Title of Supervisor:		May v	May we contact?			
Your Title:		Salar	Salary \$			
Duties:						
Reason for Leaving:						
References						
Name	Title		Relationship	Telephone	Number of Years	

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#### **APPLICANT'S CERTIFICATIONS AND AGREEMENTS**

TO ALL APPLICANTS: PLEASE READ THIS SECTION CAREFULLY AND SIGNIFY YOUR UNDERSTANDING BY SIGNING YOUR NAME IN THE SPACE PROVIDED.

I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge. I understand that any falsification or material omission of fact on this application shall lead to refusal of employment or dismissal from employment. I authorize any investigation into the statements I have made in this application as necessary to arrive at an employment decision. In consideration of my employment, I agree to conform to the rules, regulations and policies of the Town of North Haven.

I authorize representatives of the Town of North Haven to obtain pertinent information from my previous employers, references, and other persons with knowledge of my work history and background. I authorize my previous employers, references, and persons with knowledge of my work history and background to provide pertinent information to the Town of North Haven and hereby release all such persons and waive any and all claims, demand or causes of action whatsoever, in connection with the request for release of such information. I also voluntarily agree to submit to any lawful security examination or investigation as a condition precedent to employment or at any time during my employment. I hereby release the Town of North Haven, its agents and employees from any liability resulting from or in connection with the results or use of the results of any of the above described examinations, reference checks and investigations.

I understand that, as a condition precedent to employment, the Town of North Haven conducts thorough background checks (which may include a check of my criminal history) on prospective employees. I agree that, if contacted with respect to such background check, that I will fully cooperate and provide any information requested. I understand that, as a condition of my consideration for employment with the Town of North Haven, or as a condition of my continued employment with the Town of North Haven, the Town of North Haven may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness.

I hereby authorize and consent to the Town of North Haven's procurement of such a report. I understand that, pursuant to the federal Fair Credit Reporting Act, the Town of North Haven will provide me with a copy of any such report if the information contained in such report is, in any way, to be used in making a decision regarding my fitness for employment with the Town of North Haven. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report.

As a condition precedent to employment, I voluntarily consent to a controlled substance test in accordance with applicable law and understand that a positive and properly confirmed drug test for controlled substances or refusal to submit to a drug test is grounds for denial or termination of employment. I also voluntarily consent to a pre-employment medical examination conducted at the request of the Town of North Haven. I understand that the results of these medical examinations and tests will be provided to the Town of North Haven.

APPLICANT'S SIGNATURE	DATE
PLEASE PRINT NAME	

I have read, understand and agree to the forgoing.

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